

PRELIMINARY ASSESSMENT (PA) CHECKLIST

This checklist can be used to help determine if additional response beyond the PA is warranted. This checklist should summarize the rationale for the decision if additional assessment or response is required under CERCLA. Use additional sheets, if necessary.

Checklist Preparer: Jon Vopata / Environmental Scientist 4/24/14
Name/Title Date
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Site Name and CERCLIS I.D.: Standard Products/West Kellogg KSN000706571

Previous Names or Alias: _____

State I.D.: C2-087-72515

Site Location: 7920 W Kellogg Avenue, Wichita, Kansas 67209

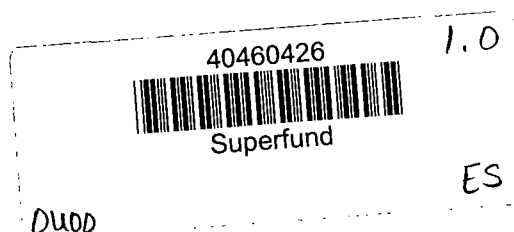
Latitude: 37.673344 **Longitude:** -97.433751

Describe the release (or potential release) and its probable nature: Tetrachloroethylene (PCE) was detected in three private drinking water wells at concentrations exceeding KDHE Tier 2 RSK levels and MCLs. Trichloroethylene (TCE) was detected in two private drinking water wells at concentrations exceeding KDHE Tier 2 RSK levels and MCLs. Residential properties in the vicinity of the site rely on domestic wells for drinking water. It is likely there are additional drinking water wells impacted with PCE and/or TCE. The source of contamination was not identified during the PA.

Part 1 - Superfund Eligibility Evaluation

| | YES | NO |
|---|-----|----|
| 1. Is the site currently in CERCLIS or an "alias" of another site? | X | |
| 2. Is the site being addressed by some other remedial program (Federal, State, or Tribal)? | | X |
| 3. Are the hazardous substances potentially released at the site regulated under a statutory exclusion (e.g., petroleum, natural gas, natural gas liquids, synthetic gas usable for fuel, normal application of fertilizer, release located in a workplace, naturally occurring, or regulated by the NRC, UMTRCA, or OSHA)? | | X |
| 4. Are the hazardous substances potentially released at the site excluded by policy considerations (i.e., deferred to RCRA corrective action)? | | X |
| 5. Is there sufficient documentation to demonstrate that no potential for a release that could cause adverse environmental or human health impacts exists (e.g., comprehensive remedial investigation equivalent data showing no release above ARARs, completed removal action, previous HRS score determined, or an EPA approved risk assessment completed)? | | X |

Please explain all "yes" answer(s). The site is currently in CERCLIS.



| Part 2 - Site Evaluation | YES | NO |
|---|------------|-----------|
| Does documentation indicate that a target (e.g. drinking water wells, drinking surface water intakes, etc.) at or adjacent to the site has been exposed or potentially exposed to a hazardous substance, pollutant or contaminant released from the site? | X | |
| Is there an apparent release and no documented on-site targets or targets immediately adjacent to the site, but there are nearby actual or potential targets (e.g., targets within 1 mile)? | | X |
| Does the site lack documented on-site, adjacent, or nearby targets? | | X |
| Does the site lack releases or potential to release of hazardous substances, pollutants or contaminants? | | X |

Please explain all "yes" answer(s). PCE and TCE were reported in private drinking water well at concentrations exceeding KDHE Tier 2 RSK levels and MCLs.

Part 3 - EPA Site Assessment Decision

| | |
|---|--------------------|
| <p>Check the box that applies based on the conclusions of the PA:</p> <p><input type="checkbox"/> NFRAP</p> <p><input checked="" type="checkbox"/> Higher Priority SI</p> <p><input type="checkbox"/> Lower Priority SI</p> <p><input type="checkbox"/> Defer to RCRA Subtitle C</p> <p><input type="checkbox"/> Defer to NRC</p> <p><input type="checkbox"/> Refer to Removal Program - further site assessment needed</p> <p><input type="checkbox"/> Refer to Removal Program - NFRAP</p> <p><input type="checkbox"/> Site is being addressed as part of another CERCLIS site</p> <p><input type="checkbox"/> Site is being addressed by a State program (specify program): <u>KDHE State Water Plan</u></p> <p><input type="checkbox"/> Other: _____</p> | |
| <p>KDHE Reviewer: _____</p> | |
| <p>Name/Signature</p> | <p>Date</p> |